L19000147904

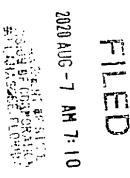
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COVER LETTER

TO:	Registration Se Division of Cor				
SUBJEC	R5 Homes	LLC	•		
SUBJE	Name of Limited Liability Company				
The encl	losed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please re	eturn all correspo	indence concerning this matter	to the following:		
		Robin Campbell			
			Name of Person		
		R5 Homes LLC			
			Firm/Company		
		1471 Cades Bay Ave			
		Address			
		Jupiter FL, 33463			
		robincampbell@kw.com	City/State and Zip Code		
		. •	to be used for future annual report not	ification)	
For furth	her information c	oncerning this matter, please c	all:		
Robin C	Campbell		561 352-6393		
	Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclosed	d is a check for th	ne following amount:			
□ \$25	.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Addres Registration S		<u>Street Address:</u> Registration Se	ection	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Division of Corporations
The Centre of Tallahassee

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

R5 Homes LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on June 12, 2019 Florida document number _____L19000147904 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

__. Florida _

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Gregory Campbell	345 Martin Ave Greenacres FL 33463	□Add
			■Remove
		□Change	
		□Add	
		□Remove	
		☐Change	
		□ Add	
		□Remove	
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		****	□Change

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(If an effi Note:	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	July 31 2020
	Signature of a member or authorized representative of a member
	organitate of a member of authorized representative of a member
	Gregory Campbell

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